## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

ISSUE FEE

----

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All infurther correspondence including the Fattent advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address, and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

05/23/2006

Baker Botts L.L.P. 2001 Ross Avenue Dallas, TX 75201-2980

APPLN. TYPE

Authorized Signature

Typed or printed name

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (\$71) 273-2885, on the date indicated below.

(Denositor's name (Sie (Date

TOTAL FEE(S) DUE

38,302

Registration

DATE DUE

APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO 10/072.069 02/05/2002 David W. McDaniel 062891.0673 1122 TITLE OF INVENTION: ADDRESS HOPPING OF PACKET-BASED COMMUNICATIONS

PUBLICATION FEE

SMALL ENTITY

Barton E

Showalter

nonprovisional	110	\$1400		\$300	\$1/00	08/23/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS		
PATEL, ASHOKKUMAR B		2154		709-245000	,	
"Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.  3. ASSIGNEE NAME AND	ence address (or Change of 12) attached. ion (or "Fee Address" Indica ir more recent) attached. Usa RESIDENCE DATA TO B	Correspondence ation form of a Customer E PRINTED ON TI	(1) the na or agents (2) the na registered 2 registered listed, no		member a 2es of up to no name is 3	aker Botts L.I.P.
(A) NAME OF ASSIGNE Cisco Techno	logy, Inc.	(	(B) RESIDE Sa	NCE: (CITY and STATE OR C	OUNTRY)	ow, the document has been filed for
4a. The following fec(s) are e	enclosed:	4b. [ d) [	Payment of A check Payment	Fec(s): in the amount of the fee(s) is end by credit card. Form PTO-2038	closed. is attached.	(s), or credit any overpayment, to se an extra copy of this form).
	IALL ENTITY status. See	37 CFR 1.27. [	b. Applic	ant is no longer claiming SMAL y) or to re-apply any previously other than the applicant; a regis	L ENTITY status.  paid issue fee to the stered attorney or a	See 37 CFR 1.27(g)(2), the application identified above, gent; or the assignee or other party in

This collection of information is required by 7 GPR 1.311. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentialibit is preserved by 35 US. C. 122 and #1 Mg. [4]. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very department of the USP Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.